Request to Reinstate Stafford Ioan

	Date
1	
(Student Borrower's Name)	(Student ID #)
•	
	(Signature of Borrower)
	(Borrower's Phone Number)
	(Borrower's email address)

If you agree to the terms and conditions of this letter, please mail letter to:

Hampton University
Office of Financial Aid and Scholarships
200 William R. Harvey Way
2nd Floor Whipple Barn
Hampton, VA 23668

Or email the form to financialaid@hamptonu.edu